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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGANIZATION					
		(See instructions)				Office use only	
	NAME OF COMMITTEE (in f	full)	(Check if name is changed)		mple: If typying, type the lines	12FE4M5	5
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ADDF	RESS (number and s	street)	401 New York Aver	nue, NW		1111	
_	(Check if address is changed)	. 1	1th Floor	111	<u> </u>	1111	
X			ASHINGTON			DC	20005 -
				CITY		STATE▲	ZIP CODE ▲
COM	MITTEE'S E-MAI		ease provide only one e-	-mail addr	ess)		
	(Check if address is changed)	, ni	buttar@epsa.org				
COM	MITTEE'S WEB I	PAGE ADDRESS	S (URL)				
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2.	DATE M M M	D D D /	^Y 2009				
3. F	FEC IDENTIFICA	TION NUMBER		C Coo	326009		
4. I	S THIS STATEM	ENT N	NEW (N) OR	X	AMENDED (A)		
Loortif	is that I have exami	and this Ctatament	and to the best of my kno	ovelodgo on	d haliaf it in true correct	and complete	
rcerui	y mai i nave exami	ned this Statement	and to the best of my kind	owiedge ar	a beller it is true, correct	and complete	
Туре	or Print Name of	Treasurer	Mr. John E. She	lk			
Signa	ature of Treasurer	Electronically	Filed by Mr. John	E. Shell	<u> </u>	Date 1	1 23 / 2009
NOTE	: Submission of fal		•	-		·	nalties of 2 U.S.C. §437g.
	0.00	ANY	CHANGE IN INFORMA	ATION SH			AYS
	Office Use Only				For further information Federal Election Comm Toll Free 800-424-9530	nission	FEC FORM 1 (Revised 02/2009)